

MAR 03 2011

CITY CLERK'S OFFICE

Please type or print in ink.

2011 MAR 25 AM 1:46

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Rodarmel

Willard

James

1. Office, Agency, or Court

Agency Name

City of Lemoore

City Council (mayor)

Division, Board, Department, District, if applicable

Your Position

Council Member / Board Member

► If filing for multiple positions, list below or on an attachment.

Agency: see attach page # 3

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Lemoore

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is _____, through December 31, 2010.

☐ Leaving Office: Date Left _____
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date _____

☐ The period covered is _____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that

Date Signed

March 03, 2011

(month, day, year)

Signature

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <u>Willard James Rodarmel</u> |

| | |
|---|---|
| ▶ 1. BUSINESS ENTITY OR TRUST | |
| Lemoore Recycling | |
| Name 345 North 19th Ave. Lemoore, Ca. 93245 | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY Recycling CRV | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/10 ____/____/10 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION <u>Owner</u> | |

| | |
|---|---|
| ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000 |

| | |
|--|--|
| ▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) | |
| <u>Allan Company, Fresno Ca.</u> | |
| <u>Western Stratege Materials, Hayward Ca.</u> | |

| | |
|--|---|
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/10 ____/____/10 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership | |
| <input type="checkbox"/> Leasehold <u>Yrs. remaining</u> <input type="checkbox"/> Other | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

| | |
|--|---|
| ▶ 1. BUSINESS ENTITY OR TRUST | |
| Name | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/10 ____/____/10 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION | |

| | |
|---|--|
| ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 |

| | |
|--|--|
| ▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) | |
| | |
| | |

| | |
|--|---|
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/10 ____/____/10 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership | |
| <input type="checkbox"/> Leasehold <u>Yrs. remaining</u> <input type="checkbox"/> Other | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

Comments: _____

STATEMENT OF ECONOMIC INTERESTS

**If filing multiple positions, list additional agency(ies)/ position(s):
(Attach a separate sheet if necessary.)**

1. OTHER; Office, Agency, or Court

Agency; Kings Waste & Recycling Authority

Position; Board Member

Agency; Kings County Area Public Transit Agency,

Position; Board Member

Agency; Indian Gaming Local Benefit Committee

Position; Committee Member

**Agency; Lemoore Volunteer Fire Department Qualifications Review
Committee**

Position; Committee Member